

Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>LA</i>	<i>1089</i>	<i>9/29</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>10-1-99</i>
FORMALITY REVIEW	<i>LA</i>	<i>10390</i>	<i>10/7/99</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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